

**UNITED STATES DISTRICT COURT**  
**NORTHERN DISTRICT OF ILLINOIS**

**SUMMONS IN A CIVIL CASE**

OLEG SHULZHENKO

CASE NUMBER: 08CV2285

v.

ASSIGNED JUDGE: JUDGE NORGL

LIFE INSURANCE COMPANY OF  
NORTH AMERICA (a CIGNA company)

DESIGNATED  
MAGISTRATE JUDGE: MAGISTRATE JUDGE MASON

TO: (Name and address of Defendant)

LIFE INSURANCE COMPANY OF NORTH AMERICA (a CIGNA company)  
c/o Illinois Director of Insurance  
James R. Thompson Center  
100 W. Randolph St., Suite 9-301  
Chicago, IL 60601-3395

**RECEIVED**  
STATE OF ILLINOIS

APR 23 2008

**IDFPR**  
DIVISION OF INSURANCE  
CHICAGO, ILLINOIS

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Mark D. DeBofsky  
Daley, DeBofsky & Bryant  
55 West Monroe Street, Suite 2440  
Chicago, IL 60603

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

NOTE: When the print dialogue box appears, be sure to uncheck the Annotations option.

**Michael W. Dobbins, Clerk**



(By) DEPUTY CLERK

April 22, 2008

Date



AO 440 (Rev. 05/00) Summons in a Civil Action

## RETURN OF SERVICE

Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE	4/28/08
NAME OF SERVER (PRINT)	TITLE	Office Clerk
Check one box below to indicate appropriate method of service		
<input checked="" type="checkbox"/> Served personally upon the defendant. Place where served:	James R Thompson Center 100 W Randolph Suite 9-301 Chicago, IL 60601	
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.	Name of person with whom the summons and complaint were left: _____	
<input type="checkbox"/> Returned unexecuted: _____	_____	
<input type="checkbox"/> Other (specify): _____	_____	
<input type="checkbox"/> _____	_____	
<input type="checkbox"/> _____	_____	

## STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL

## DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on

4/28/08

Date

Kalinda Piper  
*[Signature]*  
Signature of Server55 W Monroe Ste 2440 Chicago, IL 60603  
Address of Server

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.